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THE GREAT YARMOUTH EDUCATION AUTHORITY

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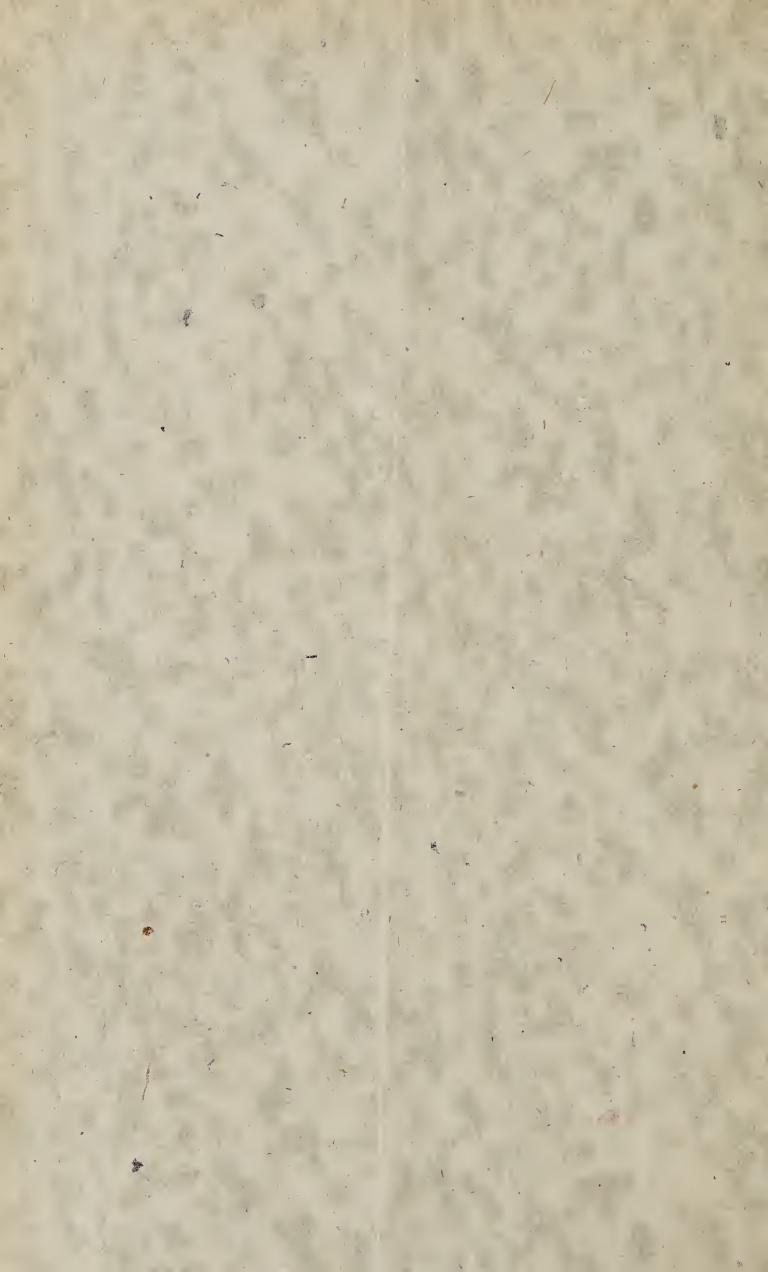
ANNUAL REPORT

OF

THE SCHOOL MEDICAL OFFICER
For 1948

GREAT YARMOUTH:

YARE PRINTING Co., LTD., KING STREET, 1949.





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TO THE CHAIRMAN AND MEMBERS OF THE EDUCATION AUTHORITY OF GREAT YARMOUTH.

Public Health Department, Town Hall,

Great Yarmouth.

1949.

Mr. Chairman, Ladies and Gentlemen,

I have the honour to present the report on the work of the School Health Service for 1948.

The National Health Service Act 1946, which came into force during the year, brought various changes in the administration of the service, particularly in relation to specialist treatment, but in practice the arrangements continued more or less as in previous years.

Shortage of medical staff for a considerable part of the year reduced the number of periodic medical inspections in schools, but

the number of attendances at clinics was almost doubled.

The classification of the general condition of pupils in the table shows almost the same results as last year, but, as was then pointed out, these figures must be treated with some reserve; it would be unjustifiable to draw conclusions from minor variations.

The improvement in the cleanliness of schoolchildren is a satisfactory feature of the report but the fact that only the vigilance of the School Nurses is able to achieve this standard provides grounds for regret about the standard of cleanliness in the homes from which a few of the children come.

In common with other Education Authorities the service suffers from a quite inadequate provision of special schools for handicapped children throughout the country. The Authority's proposed scheme for home teaching of selected handicapped pupils should ease the situation to a certain extent.

The Senior Dental Officer's report shows a highly satisfactory rate of acceptance of treatment but shortage of staff reduced the amount of work below what is desirable.

It is a matter for regret that it has not yet been possible to start the erection of the new clinic.

I wish to express my thanks, to you for the kind reception I received when I took up duties and for your support during the remaining period of the year, to the staffs of the Education Department and the schools for their willing co-operation and help, and to the staff of the School Health Service for a good year's work.

I am, Mr. Chairman, Ladies and Gentlemen, Your obedient servant,

K. J. GRANT,
School Medical Officer.

STAFF OF SCHOOL HEALTH SERVICE.

School Medical Officer:

V. N. LEYSHON, M.D., B.S.(LOND.), M.R.C.S., L.R.C.P., D.P.H. (Resigned 10.4.48).

K. J. GRANT, M.A., M.B., CH.B., D.P.H. (Commenced 1.6.48).

Assistant School Medical Officers:

G. H. WHALLEY, M.B., B.S., D.P.H., B.HY. (Resigned 19.4.48).

W. J. HUTCHINSON, M.B., B.CH., B.A.O., D.P.H. (Commenced 8.11.48).

B. M. KELLY, M.B., CH.B., B.A.O., L.M., D.C.H.

E. N. T. Surgeon (Part-time):

B. ADLINGTON, M.R.C.S., L.R.C.P., F.R.C.S. (Ed.).

Ophthalmologist (Part-time):

D. K. SOUPER, M.A., M.B., B.CH., D.O.M.S.

Senior Dental Officer:

W. NICHOLLS, L.D.S., R.C.S.

Assistant Dental Officer:

C. A. TINN, L.D.S. (Commenced 12.1.48, Resigned 30.9.48.)

Orthopaedic Surgeon (Part-time):

H. A. BRITTAIN, M.A., M.B., B.CH., B.A.O., M.CH., F.R.C.S. (Eng.)

Psychiatrist (Part-time):

J. V. MORRIS, B.A., M.D., M.B., B.CH., B.A.O., L.M.

School Nurses:

Miss R. Whiley, s.r.n.

Miss D. Ireland, S.R.N.

(Commenced 1.4.48.)

Miss E. Pretty, S.R.N. (Commenced 1.3.48).

Miss A. Taylor, s.r.n. (Resigned 31.1.48).

Physiotherapist:

Mrs. F. M. F. Keane, M.E., L.E.T.

Chief Clerk:

E. GARRETT.

Clinic Clerks:

Miss M. Key.

Miss P. Tollick.

Mrs. S. Hall.

Dental Clinic Attendant-Clerks:

Miss G. Press.

MISS K. COOPER.

CO-ORDINATION.

The close co-ordination between the School Health Service and the other Health Services of the Borough was maintained. The Education Authority and the County Borough Council decided to revert to the previous practice of combining the appointments of Health Visitors and School Nurses in the same individuals as opportunity permits, and this should lead to even closer co-ordination. This decision should also assist this Authority to fulfil the Ministry of Education's requirements that newly-appointed School Nurses shall, with some exceptions, be qualified as Health Visitors.

The establishment of the Regional Hospital Board and the Executive Council under the National Health Service Act 1946 resulted in various modifications in the School Health Service, and the negotiations required provided the opportunity for the establishment of close and happy relations with these bodies.

SCHOOL HYGIENE.

There are seven schools of recent construction with a high standard of hygiene and sanitation. These include the new school for infants with a nursery class at Gorleston, which was completed and occupied during the year. The new school for juniors which is under construction at Gorleston will conform to the Building Regulations laid down for schools as a result of the Education Act 1944.

The old senior department of the Cobholm School was converted for use as an infants' school with one nursery class. The conversion included renewal of sanitary accommodation throughout. Additions and improvements were made at the Nelson Junior and St. George's Infants' Schools and in connection with the new prefabricated classrooms which were erected at the Technical High School.

Several schools were provided with hot water for wash hand basins.

SCHOOL POPULATION AND SCHOOL ATTENDANCE.

The following table shows the average number on books and the average attendance for the year ended 31st March, 1948:—

	Total Accom- modation	Average Nos. on Registers	Average Attend- ance	Per cent.
County Schools: Primary Schools, Infants Primary Schools, Junior Secondary Schools	1930 2410 2160	1466 2036 1363	1261 1889 1253	87 92 92
Total	6500	4865	4403	90
Voluntary Schools: Infants Senior and Junior	214 882	178 748	153 699	86 93
Total	1096	926	852	92
Aggregate	7596	5791	5255	90

SCHOOL MEDICAL INSPECTION.

Medical inspection of pupils attending maintained primary and secondary schools.

Periodic Medical Inspections.

Number	of	inspections	in	the	prescribed	groups :
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Entrants	*****	•••••	*****	464
Second age group	•••••	•••••	•••••	515
Third age group		******	*****	444
Total				1423
•				

Other Inspections.

Number of special inspections Number of re-inspections	ns		125 440
Total		*****	565

Pupils Found to Require Treatment.

Number of other periodic inspections

Number of individual pupils found at periodic medical inspection to require treatment (excluding dental diseases and infestation with vermin):—

Group	For defect- ive vision (excluding squint)	For any of the other conditions recorded	Total individual pupils
Entrants Second age group Third age group Total (prescribed groups) Other periodic inspections	2 58 35 95	119 123 102 344	119 156 133 408
Total	95	344	408

The drop in the number of children inspected as compared with recent years resulted from a shortage of medical staff for a portion of the year. The invitation sent to parents to attend the inspections was accepted in the great majority of cases.

Findings at school medical inspections.

Defect or Disease	Periodic Inspections		Special I	nspections	
	No. of defects		No. of defects		
	Requiring treatment	Requiring to be kept under observation, but not requiring treatment	Requiring treatment	Requiring to be kept under observation, but not requiring treatment	
Skin	46	7	15	5	
Eyes :— Vision	95 16 9	4 · 4 9	12 1 9	4	
Ears:— Hearing Otitis Media Other	5 13 50	22 24 16	3 11 4	2 2	
Nose or Throat Speech Cervical Glands	73 	98 3 38	17 	6 2 12	
Heart & Circulation Lungs Developmental:—	5 2	33 19	3 10	8 5	
Hernia Other Orthopædic :—	2 3	3 1	2.	_1	
Posture Flat Foot Other	12 96 10	23 62 25	4 19 4	$\frac{3}{3}$	
Nervous System :— Epilepsy Other	8	36	3		
Psychological:— Development Stability Other	1 1 18	3 14 46		10 1	

Classification of general condition of pupils inspected during the year in age groups.

Age Groups	Number of Pupils		A. ood)		3. 'air)		C.
	Inspected	No.	% of col. 2.	No.	% of col. 2.	No.	% of col. 2.
Entrants Second age group Third age group Other periodic	464 515 444	264 203 215	57% 39% 48%	192 277 213	41% 54% 48%	8 35 16	2% 7% 4%
inspections Total	1423	682	48%	682	48%	59	4%

TREATMENT.

Minor Ailments and Skin Diseases.

	\	Number of defects treated, or under treatment during the year.
Skin:—		
Ringworm—Scalp :—		
X-ray treatment	*****	7
Other treatment	••••	2
Ringworm—Body	*****	13
Scabies	•••••	39
Impetigo	•••••	158
Other skin diseases		252
Eye disease:—		
(External and other, but exclu		
errors of refraction, squint,	and	2.42
cases admitted to Hospital		342
Ear defects		294
Miscellaneous:—		
(e.g. minor injuries, bruises, sores,	chil-	0.770
blains, etc.)	•••••	2558
Total		3665

Total number of attendances at Authority's

Minor Ailments Clinics

Clinics were held at Yarmouth and Gorleston each school day and on prescribed days during the school holidays.

16324

Although primarily for the treatment of minor ailments, these clinics have broadened in function and are used as clearing houses for a great variety of diseases and defects. Pupils requiring consultation or treatment outside the scope of the clinic are referred to wherever they can most readily obtain it.

Arrangements exist with Addenbrooke's Hospital, Cambridge, for X-ray treatment of ringworm of the scalp and seven cases received this treatment during the year.

Defects of Vision and Squint.

/			No.	of defects
		4	de	ealt with
Errors of refraction (includin	g squint)		305
Other defect or disease of the	eyes (exc	cluding th	ose	
recorded as minor ailmen	nts)			15
Total				320
No. of pupils for whom spec	ctacles w	ere :—		
Prescribed			*****	142
Obtained		*****		142
Total cases seen in year		•••••		336

Defects of vision were treated at the School Clinic by the ophthal-mologist. This arrangement continued after the 5th July when all children became eligible for ophthalmic treatment under the National Health Service, but the system of payment of the ophthalmologist was altered in accordance with Ministry instructions.

Diseases of the Ear, Nose and Throat.

		Total number treated
Received operative treatment:—		
for adenoids and chronic tonsillitis		299
for other nose and throat conditions	*****	11
Received other forms of treatment		7
		State and State
Total		317

The Education Authority's arrangements for treatment of these diseases at the Great Yarmouth General Hospital continued until the National Health Service came into force on the 5th July. Thereafter cases were referred to Hospital in the usual way but treatment was carried out under National Health Service arrangements.

Orthopaedic and Postural Defects.

No. treated as in-patients in hospitals or hospital	
schools	35
No. treated otherwise, e.g. in clinics or out-patient	
departments	413

The Orthopædic Clinic at Melton Lodge continued throughout the year. The orthopædic surgeon attended monthly and the physiotherapist held treatment sessions twice weekly. Home visiting and treatment by the physiotherapist were continued. Cases requiring operative treatment were referred to the Great Yarmouth General Hospital and to the Norfolk and Norwich Hospital.

Child Guidance and Speech Therapy.

A Child Guidance Clinic, run jointly with the Norfolk County Council, was opened at Melton Lodge at the end of 1947.

The scope of the activities during the year was limited because a complete child guidance team was not available.

21 children attended the clinic during the year.

No facilities for speech therapy were available during the year.

HANDICAPPED PUPILS.

The following list shows the number of handicapped pupils maintained in residential special schools:—

•		
Blind pupils		4
Partially sighted pupils		
Deaf pupils		6
Partially deaf pupils		2
Delicate pupils	*****	
Diabetic pupils	•••••	
Educationally sub-normal pupils	•••••	1
Epileptic pupils	*****	2
Maladjusted pupils	*****	
Physically handicapped pupils	•••••	2
Pupils suffering from speech defect	•••••	
Pupils with multiple disabilities	•••••	

No pupils were maintained in day special schools.

Official ascertainment of handicapped pupils was undoubtedly incomplete in respect of several categories; this was probably determined by the knowledge in the minds of Medical Officers that residential accommodation for certain categories was practically unobtainable and that there was no provision for day special schools. It is hoped to improve ascertainment in future years if only to show the extent of the problem.

The Authority has proposals to establish a day special school for delicate and physically handicapped pupils which will also serve

areas within the Norfolk County Council, and hopes to obtain places in a residential school for educationally subnormal pupils which the Norfolk County Council proposes to establish.

Three pupils suffering from disability of mind were reported to the Local Authority under Section 57 (3) of the Education Act, 1944, as being incapable of receiving education at school. One case previously reported was reviewed during the year and the original report cancelled under Section 8 of the Education (Miscellaneous Provisions) Act, 1948.

DIPHTHERIA IMMUNISATION.

The clinic facilities for immunisation were maintained throughout the year.

93 children of school age were immunised. These are children who failed to be immunised in infancy in spite of the efforts of the Health Department. A reduction of the number requiring immunisation for this reason would be welcome.

386 children who had previously been immunised received "booster" doses.

To encourage a larger number of children to have the booster doses, a scheme for administering them in schools instead of at clinics was introduced during the year.

No case of diphtheria occurred in the Borough during the year.

INFECTIOUS DISEASES.

The following table shows the number of notified cases of infectious diseases in the school population during the year and in preceding years.

Disease	1948	1947	1946
Scarlet fever Diphtheria Measles Whooping cough Pneumonia	95	53	34
			6
	217	82	93
	59	36	29
	4	3	3

The school nurse made the necessary home visits in relation to infectious diseases and advised on precautions to prevent the spread of infection. Contacts were excluded from school when required.

TUBERCULOSIS.

Three cases of pulmonary tuberculosis and three of non-pulmonary tuberculosis among schoolchildren were notified during the year.

INFESTATION WITH VERMIN.

39472
770
582

The drive against head louse infestation mentioned in the last report showed some results in that the percentage of pupils infested dropped from 5% to 1.9%. The number of infestations was largely accounted for by a small number of habitual offenders who after cleansing became re-infested, probably from an adult in their own homes. Every effort is made to deal with the problem at its source, but it is often difficult to obtain the co-operation of the parents in the homes and the School Nurses have no powers except in relation to the school children.

SCHOOL DENTAL SERVICE.

The following is the report of the Senior Dental Officer:—
The year has been one of progress in the School Dental Service,
the main feature being an increase in the variety and amount of work
done as the result of the services of an additional full-time Dental
Officer at the Yarmouth clinic.

The work this staff of two is called upon to perform includes the dental inspection and treatment of the whole of the school population, expectant and nursing mothers and pre-school children. The scheme is also extended to children attending the Occupation Centre for the mentally defective.

It will be appreciated therefore what a valuable asset to treatment has been the introduction of a modern gas apparatus to each clinic in order that a general anaesthetic can be administered as and when required. Instead of referring our patients to hospital, as previously, we can treat them at the clinic, thus speeding up the work and enabling us to treat such cases as are not suitable for local anaesthetics.

The new card, which the Ministry introduced last year in order that a complete record of both inspections and treatment may be kept of each child throughout the years in the most readily available form, has been adopted. It has involved a great deal more clerical work, and much of it has been borne by the head teachers and their staffs. We appreciate their willing and most useful co-operation and thank them for their valuable practical assistance.

During the year the upper floor of the Gorleston clinic was taken over, decorated, and equipped as a dental clinic. The opening of this clinic in May to supply the needs of the west side of the river is a great advantage as it is situated in an accessible place for the schools. The equipment is excellent and is comparable to even the best equipped of school clinics. The accommodation is good and allows room for expansion.

In September war damage repairs and redecoration of the Yar-mouth clinic were undertaken, but were not completed by the end of the year.

Here is a brief summary of the work undertaken during the year:—

Number of pupils inspected by the Authority's Dental Officers:-

Periodic age gro Specials	oups			4263 368
Total (Periodic an	d Specia	als)	4631
Number found to require Number actually treated Attendances made by pur Half-days devoted to:—	0	*****		2591 1462 3374
Inspection Treatment				41 396
Total		•••••		437
Fillings:— Permanent teeth Temporary teeth			·	1697 284
Total		•••••	•••••	1981
Extractions:— Permanent teeth Temporary teeth				360 1723
Total		•••••	*****	2083
Administration of general Other operations:—	32			
Permanent teeth Temporary teeth				207 325
Total		•••••	•••••	532

Of the 4,263 examined, 2,223 or 52% were referred for treatment, and 2,007 or 91% accepted.

The 3,374 attendances were made by 1,142 children, of whom 1,455 were completely treated.

The average daily attendance was 16 and the average number of completed treatments was 7.

In the routine age groups for every 2 permanent extractions 11 fillings were done, whilst in the casual group 4 were done.

The teeth of 168 were scaled and cleaned and 3 cases treated for severe gingivitis, 246 children had silver nitrate applied to their temporary teeth and 4 root treatments in anterior teeth were done.

In addition to the judicious extraction of teeth to relieve overcrowding or to prevent irregularities, 20 children were treated for various types of irregularity by fixed appliances. The Assistant Dental Officer made and fitted the appliances and I should like to stress the importance of his valuable work. The results were gratifying and patients and parents were very satisfied.

We were sorry to lose the Assistant Dental Officer's services in September when he left the district to take up another appointment. For the successful carrying out of our enlarged schemes of work it is vitally important that another full-time dental officer should be appointed to succeed him as soon as possible.

WALTER NICHOLLS.

PROVISION OF MEALS.

(a) The daily average of meals served during the year was 3,217, of which 278 were free and 2,939 were on payment.

(b) Milk.

Milk is available daily for children attending all schools in the Borough. The average number of bottles supplied each day was 5,090. The milk was supplied in individual bottles containing one-third of a pint and an adequate number of straws was available to enable the milk to be consumed from the bottles. During the summer holidays a number of schools were opened at stated hours to enable children to have the supply continued.

The Ministry of Food scheme under which children who are unable to attend school on account of disability of mind or body may be supplied with one pint of milk at a reduced rate was operated throughout the year and a number of parents took advantage of the scheme.

(c) Additional Nourishment.

Children requiring additional nourishment in the form of vitamin supplements, etc., are supplied with these on the recommendation of the Assistant Medical Officers.

PHYSICAL TRAINING.

The following is the report of the Organiser of Physical Training:

Physical Education, although only a part of the school curriculum, has much to contribute towards a complete education.

Through Physical Education we are endeavouring to make children physically as well as mentally literate, and also socially minded. In order to ensure that these three qualities are developed, children are encouraged to use initiative in the handling of the special equipment provided, both as individuals and as members of a group.

Purposeful controlled movement and learning through doing is the keynote and with the added interest and helpful advice given by the teachers we are confident that the children are making their contribution towards life in general.

During the year a Conference on Health Education was held and groups of children, with an age range from 7—15 years, were used to illustrate the various activities carried out in the schools.

This was preceded by a short talk on Physical Education in general and on the important part it plays in education as a whole.

E. N. WALSH.

MISCELLANEOUS.

Employment of Children.

62 pupils were examined as to fitness for part-time employment.

Health Education.

A course in parentcraft was conducted by a member of the staff at a senior girls' school and opportunities were provided by the Health Department for the girls to visit the Infant Welfare Clinics. A member of the staff took part in a series of lectures on citizenship for senior pupils in one school.

Talks on health matters were given to several Parent Teachers' Associations and, judging by the demand for further talks, they were found to be useful and interesting. Medical officers took advantage of all opportunities in school medical inspection and in clinics for carrying out health education on a more individual basis.









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